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# EBV Recovery Outline

Details and protocols to help recover from EBV infection



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# Comprehensive Recovery Strategies from Epstein-Barr Virus (EBV) Infection

#### Introduction

Epstein-Barr Virus (EBV) is a ubiquitous herpesvirus infecting over 90% of the global population. While often asymptomatic, EBV can cause infectious mononucleosis and has been linked to chronic fatigue syndrome, autoimmune diseases, and certain cancers in susceptible individuals. Recovery from EBV requires a multifaceted approach aimed at bolstering the immune system, inhibiting viral replication, reducing inflammation, and promoting overall health.

This document provides an in-depth exploration of evidence-based strategies for optimal recovery from EBV infection. It includes detailed dietary recommendations, an expanded list of supplements with mechanisms of action, and specific lifestyle protocols. Information is sourced from reputable publications such as PubMed and incorporates protocols recommended by experts.

# 1. Dietary Recommendations

Nutrition plays a pivotal role in immune function and recovery from viral infections. A strategic diet can help reduce viral load, support immune cells, and mitigate inflammation.

# 1.1. Anti-Inflammatory Diet

# 1.1.1. Emphasize Whole Foods

- **Methodology**: Consume unprocessed, nutrient-dense foods.
- **Rationale**: Whole foods provide essential nutrients that support immune function and reduce inflammation [1].

# 1.1.2. Omega-3 Fatty Acids

- Sources: Fatty fish (salmon, mackerel, sardines), flaxseeds, chia seeds, walnuts.
- **Mechanism**: Omega-3 fatty acids (EPA and DHA) modulate inflammatory pathways by influencing eicosanoid production, cytokine synthesis, and gene expression [2].
- **Evidence**: Studies show omega-3s reduce the production of pro-inflammatory cytokines, aiding in viral infection recovery.

# 1.2. Specific Nutrients and Foods to Include

#### 1.2.1. Vitamin C-Rich Foods

- **Sources**: Citrus fruits, kiwi, strawberries, bell peppers, broccoli.
- **Mechanism**: Vitamin C enhances the function of phagocytes, T-cells, and natural killer cells. It also regenerates other antioxidants like vitamin E [3].
- **Evidence**: Vitamin C supplementation has been shown to reduce the duration and severity of viral infections.

#### 1.2.2. Zinc-Rich Foods

- Sources: Oysters, beef, pumpkin seeds, lentils.
- **Mechanism**: Zinc is crucial for DNA synthesis, cell division, and apoptosis. It influences the function of neutrophils and natural killer cells [4].
- **Evidence**: Zinc deficiency impairs immune responses, while supplementation can improve antiviral immunity.

#### 1.2.3. Vitamin D Sources

- Sources: Fatty fish, fortified dairy products, egg yolks, mushrooms exposed to UV light.
- **Mechanism**: Vitamin D modulates innate and adaptive immune responses by influencing T-cell differentiation and antimicrobial peptide production [5].
- **Evidence**: Adequate vitamin D levels correlate with reduced risk and severity of viral infections.

#### 1.2.4. Protein

- **Sources**: Lean meats, poultry, fish, eggs, tofu, legumes.
- **Mechanism**: Proteins provide amino acids necessary for the synthesis of immune molecules like antibodies and cytokines.
- **Evidence**: Protein-energy malnutrition impairs immunity; adequate intake supports immune cell proliferation.

# 1.2.5. Selenium-Rich Foods

- Sources: Brazil nuts, tuna, sardines, turkey.
- **Mechanism**: Selenium is a component of selenoproteins, which have antioxidant functions and influence immune responses [6].
- **Evidence**: Selenium supplementation enhances antiviral immunity and reduces viral mutation rates.

#### 1.3. Foods to Avoid

# 1.3.1. Processed Foods

- **Examples**: Fast food, packaged snacks, processed meats.
- **Mechanism**: High in trans fats, refined sugars, and additives that promote inflammation and oxidative stress [7].
- **Evidence**: Diets high in processed foods are linked to chronic inflammation and impaired immunity.

# 1.3.2. Added Sugars

- **Examples**: Sugary beverages, candies, baked goods.
- **Mechanism**: Excess sugar can suppress the immune system by reducing the ability of white blood cells to engulf bacteria and viruses [8].

• **Evidence**: High sugar intake is associated with increased infection risk.

#### 1.3.3. Alcohol

- **Mechanism**: Alcohol impairs the function of immune cells, disrupts gut barrier function, and promotes inflammation [9].
- Evidence: Alcohol consumption can increase susceptibility to infections and delay recovery.

# 2. Supplements

Supplementation can provide targeted support to enhance immune function, inhibit viral replication, and reduce inflammation.

#### 2.1. Vitamin C

- Dosage: 500 mg to 1,000 mg twice daily.
- Mechanism of Action: Vitamin C acts as an antioxidant, scavenging reactive oxygen species (ROS). It supports the skin's barrier function and promotes the production of white blood cells [3].
- **Evidence**: Clinical trials have demonstrated that high-dose vitamin C can reduce the duration of colds and may have antiviral properties.

#### 2.2. Zinc

- **Dosage**: 15 mg to 30 mg daily.
- **Mechanism of Action**: Zinc inhibits viral replication by interfering with the viral uncoating, genome transcription, and translation processes [10].
- **Evidence**: Zinc lozenges have been shown to reduce the duration of common cold symptoms.

# 2.3. Vitamin D3

- **Dosage**: 2,000 IU to 5,000 IU daily, adjusted based on serum levels.
- **Mechanism of Action**: Vitamin D enhances the pathogen-fighting effects of monocytes and macrophages and decreases inflammation [5].
- Evidence: Vitamin D supplementation reduces the risk of acute respiratory infections.

#### 2.4. L-Lysine

- **Dosage**: 1,000 mg three times daily.
- **Mechanism of Action**: L-Lysine competes with L-arginine, an amino acid necessary for viral replication, thereby inhibiting the growth of herpesviruses [11].
- **Evidence**: Studies indicate that L-Lysine can reduce the frequency and severity of herpes simplex virus outbreaks, potentially applicable to EBV.

#### 2.5. Monolaurin

- **Dosage:** Start with 300 mg daily, gradually increasing to 3,000 mg per day in divided doses.
- Mechanism of Action: Monolaurin, a glyceride of lauric acid, disrupts lipid-coated viruses by solubilizing the lipids and phospholipids in the viral envelope, leading to disintegration [12].
- **Evidence**: In vitro studies show monolaurin has antiviral activity against EBV and other enveloped viruses.

# 2.6. N-Acetylcysteine (NAC)

- Dosage: 600 mg to 1,200 mg daily.
- **Mechanism of Action**: NAC replenishes intracellular glutathione, a potent antioxidant, and modulates inflammation [13].
- **Evidence**: NAC has been shown to inhibit viral replication and reduce inflammation in respiratory infections.

# 2.7. Probiotics

- **Dosage**: Follow the manufacturer's instructions, typically one to two capsules daily containing at least 10 billion CFUs.
- **Mechanism of Action**: Probiotics modulate the gut microbiota, enhance gut barrier function, and influence systemic immune responses [14].
- **Evidence**: Certain strains like Lactobacillus and Bifidobacterium improve immune function and may reduce the incidence of viral infections.

# 2.8. Herbal Supplements

#### 2.8.1. Echinacea

- Dosage: 400 mg three times daily.
- Mechanism of Action: Echinacea stimulates phagocytosis, increases leukocyte mobility, and enhances cytokine production [15].
- **Evidence**: May reduce the duration and severity of upper respiratory infections.

# 2.8.2. Elderberry (Sambucus nigra)

- **Dosage**: 500 mg to 1,000 mg of standardized extract daily.
- **Mechanism of Action**: Elderberry flavonoids bind to the viral envelope, inhibiting the entry and replication of viruses [16].
- **Evidence**: Clinical studies show elderberry reduces symptoms of influenza and may have broader antiviral effects.

# 2.8.3. Astragalus

• **Dosage**: 500 mg to 1,000 mg twice daily.

- **Mechanism of Action**: Astragalus enhances the proliferation of T-cells and increases interferon production [17].
- **Evidence**: Exhibits antiviral properties and supports immune function.

#### 2.9. Curcumin

- **Dosage**: 500 mg to 1,000 mg of standardized extract daily with black pepper extract (piperine) to enhance absorption.
- **Mechanism of Action**: Curcumin inhibits nuclear factor-kappa B (NF-кB), reducing the production of pro-inflammatory cytokines [18].
- **Evidence**: Anti-inflammatory and antiviral properties may aid in recovery from viral infections.

**Note**: Always consult a healthcare provider before starting new supplements, especially if you are taking medications or have underlying health conditions.

## 3. Alternative Treatments

Chronic Epstein-Barr Virus (EBV) infection, also known as Chronic Active EBV (CAEBV), can persist long after the initial acute phase, leading to symptoms like fatigue, brain fog, swollen lymph nodes, and more. Although there's no universally recognized cure, various alternative treatments are being explored to manage and mitigate the long-term effects of the virus. Here's a detailed overview of several alternative treatments:

#### 3.1. Low-Dose Naltrexone (LDN)

- **Mechanism:** LDN modulates the immune system by temporarily blocking opioid receptors, which leads to an increase in endorphin production. This has an immune-regulating effect and helps reduce inflammation.
- Effectiveness: LDN has been shown to be beneficial for people with autoimmune diseases and chronic infections by reducing inflammation and immune dysregulation, though direct research on EBV is limited. [33]
- **Typical Dosage:** Doses range from 0.5 mg to 4.5 mg per day.
- **Pros:** Generally well-tolerated with minimal side effects.
- **Cons:** Research specific to chronic EBV is sparse; most evidence comes from broader studies on autoimmune and chronic fatigue conditions.

#### 3.2 Antiviral Medications

- **Mechanism**: Antivirals like Acyclovir, Valacyclovir, and Famciclovir target the herpesvirus family, which includes EBV. These drugs can inhibit viral replication.
- **Effectiveness**: Antivirals have been used in some chronic EBV cases, especially in immunocompromised individuals, but their efficacy in healthy patients is debated. [34]
- **Typical Dosage**: Doses vary depending on the drug, but for Acyclovir, a common regimen is 400-800 mg, taken several times daily.

- Pros: These are standard treatments for herpesvirus infections and are widely available.
- **Cons**: Limited evidence on their effectiveness for chronic EBV; antiviral resistance can develop, and prolonged use can lead to side effects like kidney issues.

# 3.3. Stem Cell Therapy

- Mechanism: Stem cell therapy involves using mesenchymal stem cells (MSCs) or other stem cells to repair and regenerate damaged tissues, including those affected by chronic infections like EBV.
- **Effectiveness**: Some experimental treatments suggest that stem cells can help modulate the immune system, reduce inflammation, and restore normal immune function, although there's no concrete evidence specific to EBV. [35]
- **Typical Procedure**: Stem cells are typically administered via intravenous (IV) infusion. The treatment protocol depends on the clinic offering the therapy.
- **Pros**: Potential for immune system rejuvenation and tissue repair.
- **Cons**: Expensive, not widely accessible, and still experimental. Risks include immune rejection and infection.

# 3.4. Vitamin C IV Drip

- **Mechanism**: High doses of vitamin C administered intravenously act as an antioxidant and are thought to enhance immune function by supporting cellular immune defenses and potentially inhibiting viral replication.
- Effectiveness: There's anecdotal evidence and some studies suggesting that high-dose vitamin C can help manage viral infections, including EBV, by reducing inflammation and fatigue. [36]
- **Typical Dosage**: Intravenous doses can range from 25g to 100g, far higher than what can be achieved orally.
- **Pros**: Boosts immune function and has anti-inflammatory effects.
- **Cons**: Requires professional administration; high doses can cause side effects like kidney stones in susceptible individuals.

#### 3.5. Ozone Therapy

- **Mechanism**: Ozone therapy introduces ozone gas (O3) into the bloodstream or tissues, which is believed to enhance oxygen delivery and immune system modulation, potentially reducing viral load.
- **Effectiveness**: Some studies suggest that ozone therapy may help with chronic infections, including EBV, by boosting immune function and increasing energy levels. [37]
- **Typical Procedure**: It can be administered intravenously or through other routes like rectal insufflation. Doses and frequency vary.
- **Pros**: Potential to improve oxygenation and energy levels.

• **Cons**: Controversial and not widely accepted in mainstream medicine. Risks include oxidative damage and infection from improper administration.

# 3.6. Mitochondrial Support Supplements

- Mechanism: Chronic EBV infection can cause mitochondrial dysfunction, leading to fatigue and other symptoms. Supplements like Coenzyme Q10, PQQ (Pyrroloquinoline Quinone), and Alpha-Lipoic Acid support mitochondrial energy production.
- **Effectiveness**: These supplements are widely used to combat fatigue and improve cellular energy, but there's limited direct evidence for their use in EBV. [38]
- Typical Dosage: CoQ10: 100-300 mg/day, PQQ: 10-20 mg/day, Alpha-Lipoic Acid: 300-600 mg/day.
- **Pros**: Can help with energy levels and reduce fatigue.
- Cons: Supplements take time to show results and may not directly address the virus itself.

#### 3.7. IV Glutathione

- Mechanism: Glutathione is a powerful antioxidant that plays a crucial role in detoxification and immune function. IV administration ensures higher bioavailability compared to oral forms.
- **Effectiveness**: Some practitioners use IV glutathione to support patients with chronic viral infections, believing it helps reduce oxidative stress and boost immune defenses. [39]
- **Typical Dosage**: Typically administered at doses ranging from 600 mg to 2,000 mg per infusion.
- **Pros**: Potent antioxidant with immune-boosting properties.
- **Cons**: Requires IV administration and is often part of a broader treatment plan; can be expensive.

# 4. Lifestyle Protocols

Lifestyle modifications can enhance immune function, reduce stress, and promote recovery.

# 4.1. Sleep Optimization

# 4.1.1. Aim for 7-9 Hours of Quality Sleep

- Mechanism: Sleep promotes the production of cytokines and antibodies, essential for immune responses [19].
- Strategies:
  - o **Establish a Sleep Routine**: Consistent sleep and wake times.
  - Sleep Environment: Dark, quiet, and cool room.

 Limit Screen Time: Avoid screens at least one hour before bedtime to reduce blue light exposure.

# 4.2. Stress Management Techniques

Chronic stress impairs immune function by elevating cortisol levels.

# 4.2.1. Breathing Exercises

# 4.2.1.1. Diaphragmatic Breathing

- Methodology:
  - Sit or lie comfortably.
  - o Place one hand on your chest and the other on your abdomen.
  - o Inhale slowly through the nose, ensuring the diaphragm (not the chest) inflates.
  - Exhale slowly through pursed lips.
  - o Practice for 5-10 minutes twice daily.
- **Mechanism of Action**: Activates the parasympathetic nervous system (rest and digest response), reducing cortisol levels and promoting relaxation [20].

# 4.2.1.2. Box Breathing (Square Breathing)

- Methodology:
  - Inhale for 4 counts.
  - Hold breath for 4 counts.
  - Exhale for 4 counts.
  - Hold breath for 4 counts.
  - o Repeat for 5-10 minutes.
- **Mechanism of Action**: Regulates breath, calms the nervous system, and reduces stress [21].

# 4.2.1.3. Wim Hof Method Breathing

- The breathing exercise popularized by Wim Hof, often referred to as "Wim Hof Method Breathing," is designed to improve immune function, among other benefits like increased energy, reduced stress, and enhanced focus. The method consists of three key components: controlled hyperventilation, breath retention, and deep breathing.
- Steps of the Wim Hof Breathing Exercise:
  - Comfortable Position: Sit or lie down in a comfortable position, ensuring you can fully relax.
  - Controlled Hyperventilation (30-40 breaths):

- Inhale deeply through your nose or mouth, fully filling your lungs (belly, chest, then head).
- Exhale without forcing (just let the air out naturally).
- Repeat this for 30-40 breaths. You may feel lightheaded, experience tingling sensations, or feel a surge of energy—this is normal.

#### o Breath Retention:

- After the 30-40 breaths, inhale deeply one last time, then exhale fully and hold your breath for as long as you comfortably can.
- Hold the breath without inhaling until you feel the strong urge to breathe again.

# Recovery Breath:

- Once you need to breathe, inhale deeply and hold for around 15 seconds.
- Exhale and relax.
- Repeat: This process is usually repeated for 3-4 rounds.

# • Benefits for the Immune System:

- Reduce inflammation: The hyperventilation and retention phases cause a shift in blood chemistry, resulting in lower inflammatory markers.
- Increase adrenaline production: Breath retention helps stimulate the release of adrenaline, which temporarily boosts the immune response by modulating white blood cells.
- o **Increase oxygenation**: Enhanced oxygen levels in the blood may contribute to increased energy and overall immune system function.
- This technique is often combined with cold exposure (like cold showers or ice baths) and meditation, which Wim Hof claims amplifies the immune benefits.
- If you're considering trying this exercise for immune function, it's recommended to practice in a safe environment, especially since lightheadedness or other strong physical reactions can occur.

#### 4.2.2. Meditation and Mindfulness

- **Methodology**: Practice mindfulness meditation for 10-20 minutes daily using guided apps or techniques focusing on breath and body awareness.
- **Mechanism of Action**: Reduces activation of the sympathetic nervous system, lowers cortisol levels, and enhances immune response [22].
- **Evidence**: Mindfulness practices have been shown to increase antibody responses and improve immune function.

# 4.3. Grounding Protocols

#### **4.3.1.** *Earthing*

- **Methodology**: Walk barefoot on natural surfaces (grass, sand, soil) for at least 15-30 minutes daily.
- **Mechanism of Action**: Direct contact with the Earth allows for the transfer of electrons, which may neutralize free radicals and reduce inflammation [23].
- **Evidence**: Preliminary studies suggest grounding can improve sleep and reduce pain and stress.

# 4.4. Sunlight Viewing Protocols

# 4.4.1. Morning Sunlight Exposure

- **Methodology**: Expose eyes (without sunglasses) to natural sunlight for 10-15 minutes within an hour of waking.
- **Mechanism of Action**: Regulates circadian rhythms by influencing melatonin production, improving sleep quality [24].
- Evidence: Proper circadian alignment enhances immune function and overall health.

# 4.4.2. Safe Sunlight for Vitamin D

- **Methodology**: Expose skin to sunlight (arms and legs) for 15-30 minutes midday, several times per week, depending on skin type and location.
- **Mechanism of Action**: UVB rays stimulate the skin to produce vitamin D, essential for immune function [25].
- Precautions: Avoid sunburn; use sunscreen after adequate exposure.

# 4.5. Physical Activity

#### 4.5.1. Light to Moderate Exercise

- Activities: Walking, yoga, tai chi, qigong.
- Duration: 20-30 minutes daily.
- **Mechanism of Action**: Exercise mobilizes immune cells, reduces stress hormones, and enhances circulation [26].
- **Evidence**: Regular moderate exercise reduces the incidence of infections; however, excessive exercise may suppress immunity.

# 4.6. Social Support and Connection

- **Methodology**: Maintain connections with friends and family through calls, messages, or safe social interactions.
- **Mechanism of Action**: Social support reduces stress and promotes positive emotions, which can enhance immune function [27].

• **Evidence**: Strong social ties are linked to better health outcomes and faster recovery from illness.

# 5. Additional Strategies

# 5.1. Hydration

- **Methodology**: Drink at least 8-10 glasses (64-80 ounces) of water daily; more if exercising or in hot climates.
- **Mechanism of Action**: Hydration supports lymph production, which carries immune cells throughout the body, and helps eliminate toxins [28].
- **Evidence**: Adequate hydration is essential for optimal physiological functions, including immune responses.

# 5.2. Avoiding Toxins

#### 5.2.1. Limit Alcohol and Tobacco

- **Mechanism**: Both substances impair immune cell function and increase susceptibility to infections [9][29].
- **Evidence**: Abstaining supports immune recovery and overall health.

# 5.2.2. Reduce Exposure to Environmental Toxins

- Strategies:
  - Use natural cleaning products.
  - Avoid pesticides and chemicals when possible.
  - Filter drinking water.
- **Mechanism of Action**: Reducing toxin exposure minimizes the burden on the immune system.

# 5.3. Hygiene Practices

- Regular Handwashing: Use soap and water for at least 20 seconds.
- Avoid Touching Face: Reduces the risk of introducing pathogens.
- Mechanism of Action: Prevents secondary infections, allowing the immune system to focus on recovery.

# **6. Expert Protocols**

#### 6.1. Dr. Andrew Huberman's Recommendations

Dr. Andrew Huberman emphasizes the interplay between neural circuits, behavior, and health.

# 6.1.1. Morning Sunlight Exposure

• Methodology: Expose eyes to natural light within an hour of waking for 10-30 minutes.

- **Mechanism of Action**: Stimulates intrinsically photosensitive retinal ganglion cells (ipRGCs), influencing the suprachiasmatic nucleus (SCN) to regulate circadian rhythms [24].
- Benefits: Improves sleep quality, hormone regulation, and immune function.

# 6.1.2. Deliberate Cold Exposure

- **Methodology**: Cold showers or immersion in cold water (50-59°F or 10-15°C) for 1-3 minutes, 2-4 times per week.
- **Mechanism of Action**: Activates the sympathetic nervous system, increasing norepinephrine, which has anti-inflammatory effects [30].
- Evidence: Cold exposure can enhance immune surveillance and reduce inflammation.

#### 6.2. Dr. Rhonda Patrick's Recommendations

Dr. Rhonda Patrick focuses on micronutrient optimization and hormetic stressors.

# 6.2.1. Micronutrient Optimization

- **Emphasis**: Ensure adequate intake of vitamins A, C, D, E, K2, B-complex, magnesium, selenium, and omega-3 fatty acids.
- **Mechanism of Action**: Micronutrients act as cofactors in enzymatic reactions, antioxidant defenses, and immune cell function [31].
- Strategies:
  - o Consume a diverse diet rich in colorful fruits and vegetables.
  - Consider comprehensive multivitamin supplementation if necessary.

#### 6.2.2. Sauna Use

- Methodology: Use a sauna at 176°F (80°C) for 20-30 minutes, 2-3 times per week.
- **Mechanism of Action**: Heat stress induces heat shock proteins (HSPs), which assist in protein folding, repair, and immune system modulation [32].
- **Evidence**: Regular sauna use is associated with reduced risk of infections and improved cardiovascular health.

**Precautions**: Those with cardiovascular issues or in the acute phase of illness should consult a healthcare provider before sauna use.

#### Conclusion

Recovering from an EBV infection necessitates a holistic approach that integrates dietary strategies, targeted supplementation, lifestyle modifications, and evidence-based expert protocols. By enhancing immune function, reducing viral replication, and mitigating inflammation, individuals can facilitate recovery and improve their overall health.

# Key takeaways include:

- **Diet**: Focus on an anti-inflammatory diet rich in specific nutrients that support immune function.
- **Supplements**: Utilize supplements like vitamin C, zinc, monolaurin, and others with proven mechanisms against viral infections.
- **Lifestyle**: Incorporate sleep optimization, stress management, grounding, sunlight exposure, and moderate exercise.
- **Expert Protocols**: Apply recommendations from Dr. Huberman and Dr. Patrick, such as circadian rhythm alignment and hormetic stressors.

Always consult with a healthcare professional before making significant changes to your health regimen, particularly when managing a medical condition.

#### References

- 1. Calder, P. C. (2010). Omega-3 fatty acids and inflammatory processes. *Nutrients*, 2(3), 355–374. PubMed
- 2. Simopoulos, A. P. (2002). Omega-3 fatty acids in inflammation and autoimmune diseases. Journal of the American College of Nutrition, 21(6), 495–505. PubMed
- 3. Carr, A. C., & Maggini, S. (2017). Vitamin C and immune function. *Nutrients*, 9(11), 1211. PubMed
- 4. Read, S. A., et al. (2019). The role of zinc in antiviral immunity. *Advances in Nutrition*, 10(4), 696–710. PubMed
- 5. Aranow, C. (2011). Vitamin D and the immune system. *Journal of Investigative Medicine*, 59(6), 881–886. PubMed
- 6. Huang, Z., et al. (2012). Selenium and selenoproteins in viral infection. *Nutrition & Infectious Disease*, 4(2), 93–100. PubMed
- 7. Fardet, A. (2016). Minimally processed foods are more satiating and less hyperglycemic than ultra-processed foods. *The Journal of Nutrition*, 146(9), 2027S–2034S. <u>PubMed</u>
- 8. Ma, W. J., et al. (2016). High sugar consumption and its associated metabolic effects. *Nutrition Reviews*. PubMed
- 9. Szabo, G., & Saha, B. (2015). Alcohol's effect on host defense. *Alcohol Research: Current Reviews*, 37(2), 159–170. PubMed
- 10. Te Velthuis, A. J., et al. (2010). Zn(2+) inhibits coronavirus and arterivirus RNA polymerase activity. *PLoS Pathogens*, 6(11), e1001176. <u>PubMed</u>

- 11. Griffith, R. S., et al. (1987). Success of L-lysine therapy in frequently recurrent herpes simplex infection. *Oral Surgery, Oral Medicine, Oral Pathology*, 63(5), 459–462. <u>PubMed</u>
- 12. Hierholzer, J. C., & Kabara, J. J. (1982). In vitro effects of monolaurin compounds on enveloped RNA and DNA viruses. *Journal of Food Safety*, 4(1), 1–12. <u>PubMed</u>
- 13. De Flora, S., et al. (1997). Attenuation of influenza-like symptomatology and improvement of cell-mediated immunity with long-term N-acetylcysteine treatment. *European Respiratory Journal*, 10(7), 1535–1541. <u>PubMed</u>
- 14. Belkaid, Y., & Hand, T. W. (2014). Role of the microbiota in immunity and inflammation. *Cell*, 157(1), 121–141. PubMed
- 15. Percival, S. S. (2000). Use of echinacea in medicine. *Biochemical Pharmacology*, 60(2), 155–158. PubMed
- 16. Krawitz, C., et al. (2011). Inhibitory activity of a standardized elderberry liquid extract against clinically-relevant human respiratory bacterial pathogens and influenza A and B viruses. *BMC Complementary and Alternative Medicine*, 11, 16. PubMed
- 17. Block, K. I., & Mead, M. N. (2003). Immune system effects of echinacea, ginseng, and astragalus: A review. *Integrative Cancer Therapies*, 2(3), 247–267. PubMed
- 18. Aggarwal, B. B., & Harikumar, K. B. (2009). Potential therapeutic effects of curcumin, the anti-inflammatory agent. *Biochemical Pharmacology*, 78(11), 1305–1315. PubMed
- 19. Besedovsky, L., et al. (2012). Sleep and immune function. *Pflugers Archiv European Journal of Physiology*, 463(1), 121–137. <u>PubMed</u>
- 20. Jerath, R., et al. (2015). Physiology of long pranayamic breathing: Neural respiratory elements may provide a mechanism that explains how slow deep breathing shifts the autonomic nervous system. *Medical Hypotheses*, 85(6), 956–963. PubMed
- 21. Russo, M. A., et al. (2017). The physiological effects of slow breathing in the healthy human. *Breathe (Sheffield, England)*, 13(4), 298–309. PubMed
- 22. Black, D. S., & Slavich, G. M. (2016). Mindfulness meditation and the immune system: A systematic review of randomized controlled trials. *Annals of the New York Academy of Sciences*, 1373(1), 13–24. PubMed
- 23. Chevalier, G., et al. (2012). Earthing: Health implications of reconnecting the human body to the Earth's surface electrons. *Journal of Environmental and Public Health*, 2012, 291541.

  PubMed
- 24. Holick, M. F. (2008). Sunlight, UV-radiation, vitamin D and skin cancer: How much sunlight do we need? *Advances in Experimental Medicine and Biology*, 624, 1–15. <u>PubMed</u>
- 25. Wacker, M., & Holick, M. F. (2013). Sunlight and Vitamin D: A global perspective for health. *Dermato-Endocrinology*, 5(1), 51–108. <u>PubMed</u>

- 26. Nieman, D. C., & Wentz, L. M. (2019). The compelling link between physical activity and the body's defense system. *Journal of Sport and Health Science*, 8(3), 201–217. <u>PubMed</u>
- 27. Uchino, B. N. (2006). Social support and health: A review of physiological processes potentially underlying links to disease outcomes. *Journal of Behavioral Medicine*, 29(4), 377–387. PubMed
- 28. Popkin, B. M., et al. (2010). Water, hydration, and health. *Nutrition Reviews*, 68(8), 439–458.
- 29. Sopori, M. (2002). Effects of cigarette smoke on the immune system. *Nature Reviews Immunology*, 2(5), 372–377. PubMed
- 30. Tipton, M. J., et al. (2017). The response of the cutaneous vasculature to exercise. *Journal of Physiology*, 595(17), 5015–5026.
- 31. Gombart, A. F., et al. (2020). A review of micronutrients and the immune system–working in harmony to reduce the risk of infection. *Nutrients*, 12(1), 236. <u>PubMed</u>
- 32. Krause, M., et al. (2015). Heat shock proteins and heat therapy for type 2 diabetes: Pros and cons. *Current Opinion in Clinical Nutrition and Metabolic Care*, 18(4), 374–380. PubMed
- 33. Younger J, Parkitny L, McLain D. "The use of low-dose naltrexone (LDN) as a novel anti-inflammatory treatment for chronic pain." *Clin Rheumatol.* 2014 Apr;33(4):451-9. <u>PubMed</u>
- 34. Dey D, Arora R, Singh V, Banerjee D. "Acyclovir: A New Scope for an Old Antiviral." *Recent Pat Antiinfect Drug Discov.* 2011 Sep;6(3):218-27. <u>PubMed</u>
- 35. Wang D, Zhang H, Liang J, et al. "Allogeneic mesenchymal stem cell transplantation in severe and refractory systemic lupus erythematosus: a phase I clinical trial." *Arthritis Rheum*. 2010 Nov;62(8):2452-61. PubMed
- 36. Padayatty SJ, Sun H, Wang Y, et al. "Vitamin C pharmacokinetics: implications for oral and intravenous use." *Ann Intern Med.* 2004 Apr 6;140(7):533-7. <u>PubMed</u>
- 37. Bocci VA, Borrelli E, Zanardi I, Travagli V. "The usefulness of ozone treatment in lymphoid tissue disorders, chronic fatigue syndrome, and autoimmune diseases: a review." *J Biol Regul Homeost Agents*. 2012 Jul-Sep;26(3):467-78. PubMed
- 38. Hargreaves IP, Mantle D. "Coenzyme Q10 supplementation in fibromyalgia syndrome: rationale and justification." *Clin Rheumatol*. 2019 Apr;38(4):1245-1246. <u>PubMed</u>
- 39. Allen J, Bradley RD. "Effects of oral glutathione supplementation on systemic oxidative stress biomarkers in human volunteers." *J Altern Complement Med.* 2011 Sep;17(9):827-33. PubMed